

# BOARD OF PROFESSIONAL LAND SURVEYORS

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711

WEBSITE: <u>DPR.DELAWARE.GOV</u> EMAIL: <u>customerservice.dpr@state.de.us</u>

# APPLICATION FOR REGISTRATION AS A SURVEYOR INTERN INSTRUCTION SHEET

# When to Apply for Intern Registration

**Before applying** for registration as a Delaware Surveyor Intern, you must have acquired a combination of education and/or experience under the direct supervision of a licensed professional land surveyor.

The amount of experience you need depends on your education level *and* the amount of combined office and field experience you have obtained. Use the table below to determine the amount of *pre-internship experience* required to apply.

IF you are applying on the basis of:	THEN you need
College senior or graduate of four-year surveying program	None.
Graduate of a four-year related program	2 years
Graduate of a two-year surveying program	2 years
Experience only	5 ½ years

- The experience *cannot* be concurrent with your education.
- Experience you gain under the supervision of a Maryland-licensed property line surveyor is equivalent to experience gained under the supervision of a Delaware-licensed land surveyor (24 Del. C. §2708(a)(1)c.).
- If your experience is gained under supervision of land surveyors in any state other than Delaware, the Board must determine whether it is equivalent. If determined to be equivalent, it will count.

## **Requirements for All Intern Applicants**

Us	e this application to register as a Surveyor Intern. Auxiliary forms you may need are also included with the application.
	Submit completed, signed and notarized <u>Application for Registration as a Surveyor Intern</u> .
	Enclose the non-refundable processing fee by check or money order made payable to "State of Delaware"
	If you are applying on the basis of your education as explained above, arrange for the Board office to receive an official transcript, sent <i>directly</i> from the college or university, showing your degree and date it was conferred.
	If you have already taken and passed the <u>National Council of Examiners for Engineering and Surveying</u> (NCEES) Fundamentals of Surveying examination, arrange for the Board office to receive proof of your passing score sent directly to the Board office from NCEES.
	If you currently hold, or have <i>ever</i> held, a license to practice land surveying – including an Intern registration in any other jurisdiction (state, U.S. territory or District of Columbia) – arrange for the Board office to receive verification of licensure or registration from <i>each</i> jurisdiction, sent directly from each jurisdiction to the Board office.
	Arrange for <b>each</b> actively practicing Land Surveyor who will supervise your internship to complete, sign and submit the <i>Statement of Supervising Land Surveyor-Internship</i> form.

Ш	If you are applying on the basis of 5 ½ years experience under the direct supervision of an actively practicing professional land surveyor, arrange for the Board office to receive proof of your Level IV Survey Technician Certification as established by NSPS or similar certification as approved by the Board.
	Arrange for your supervising Land Surveyor(s) to complete and send a <u>Verification of Land Surveying Experience</u> form(s) <i>directly</i> to the Board office. The form(s) must document that you have the required pre-internship experience as shown in the table above:
	If you have never been issued a U.S. Social Security Number (SSN), submit a <u>Request for Exemption from Social Security Number Requirement</u> .  The Privacy Act of 1974, Section 7, requires the following information to be given to all applicants: Applicants for any Delaware professional or occupational license, permit, registration or certificate (other than Gaming permits) are required to provide a U.S. SSN (29 Del. C. §8735(m)). The Division of Professional Regulation uses the SSN primarily to verify identity and safeguard personal information. It may also be used to enforce child support obligation (13 Del. C. §2216) and for other lawful purposes.

# **During the Internship**

During the entire internship period, Surveyor Interns must practice under the supervision of a licensed Professional Land Surveyor who is actively practicing. If the supervisory relationship ends, *both* intern and supervisor are responsible for reporting the change to the Board office within 30 days.

At the conclusion of the period of supervision, each supervisor should complete and submit a <u>Verification of Land Surveying Experience</u> form(s) <u>directly</u> to the Board office.

The *Log of Intern Experience* is provided to help both intern and supervisor keep accurate records of your intern hours. You will be asked to provide this information later on when you apply for Delaware licensure as a Land Surveyor.



# STATE OF DELAWARE

BOARD OF PROFESSIONAL LAND SURVEYORS WEBS

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# APPLICATION FOR REGISTRATION AS A SURVEYOR INTERN

# **TYPE OF APPLICATION**

1.	Select the item that describes the b	asis for your application:			
	I graduated from a four-year ( this program is acceptable.	or longer) surveying program	. I understand that the	e Board will determine whether	
	I am a college senior in a <b>four</b> whether this program is accept		orogram. I understand	that the Board will determine	
	will determine whether this pro	gram is acceptable. I have a	also completed at leas	ing. I understand that the Board to two years combined office an ervision of an actively practicing	าด
	I am a graduate of a two-year completed at least two years of projects under direct supervision concurrent with my education.	combined office and field exp	erience in responsible		)t
	I have a Level IV Survey Technology completed at least 5 ½ years e surveyor.				
	Submit proof of your Level I	/ Survey Technician Certifi	cation or similar cer	tification.	
IDI	ENTIFYING AND CONTACT INFOR	MATION			
		-			
۷.	Name:		First	Middle	_
3.	Other Names Used: None 🗌	Include maiden, former married a			
4.	Date of Birth (month/day/year):	<del></del>	Gender:	Male   Female	
5.	Have you been issued a U.S. Social If no, you must file a Request for				_
6.	Mailing Address:				
		Str	reet		
	City		State	Zip Code	_
7.	Phone:	Email:			

**EDUCATION** – Complete this section if you are applying on the basis of your education. If you are applying on the basis of 5 ½ years of experience, skip to the **EXAMINATION** section. 8. Enter the following information about your education. ATTENDANCE DATES **COLLEGE OR UNIVERSITY DEGREE EARNED** From To Arrange for the Board office to receive an official transcript, sent directly from the college or university, showing your degree and date it was conferred. **EXAMINATION** – *All* applicants complete this section. 9. Have you passed the National Council of Examiners for Engineering and Surveying Fundamentals of Surveying examination? Yes No If yes, arrange for the Board office to receive proof of your passing score, sent directly to the Board office from NCEES. **LICENSURE HISTORY** – *All* applicants complete this section. 10. Have you ever held a Professional Land Surveyor license, including an Intern registration, in another jurisdiction (state, U.S. territory or District of Columbia)? Yes \( \subseteq \text{No} \subseteq \text{If yes, enter the following information about each} \) license/registration you have held: LICENSE/REGISTRATION **JURISDICTION DATE ISSUED EXPIRATION DATE** NUMBER Arrange for the Board office to receive verification of licensure/registration and exam scores from each jurisdiction listed above, sent directly from the jurisdiction to the Board office. PRE-INTERNSHIP EXPERIENCE - If you are applying on the basis of a four-year surveying degree, skip to the SUPERVISION DURING INTERNSHIP section. 11. Enter the names of *each* actively practicing Land Surveyors who supervised your pre-internship experience: Arrange for each supervisor listed to complete and sign a Verification of Land Surveying Experience form and submit it directly to the Board office. **SUPERVISION DURING INTERNSHIP** – *All* applicants complete this section.

Arrange for each supervisor listed to complete and sign a *Statement of Supervising Land Surveyor-Internship* form and submit it *directly* to the Board office.

12. Enter the name(s) of **each** actively practicing Land Surveyor who will supervise your internship:

DISCLOSURES - All applicants complete this section.	
13. Have you ever been convicted of or entered a plea of guilty or <i>nolo contende</i> misdemeanor or any other criminal offense, including any offense for which y jurisdiction? Yes \( \subseteq \text{No} \subseteq If yes, submit a detailed explanation. Also, so history record from each jurisdiction where you have been convicted of criminal history, see <a href="State Bureau of Identification">State Bureau of Identification</a> for information on o	you have received a pardon, in any ubmit a certified copy of your criminal r pardoned. If you have a Delaware
<ol> <li>Are criminal charges pending against you in any jurisdiction? Yes ☐ No ☐ Also, enclose any relevant documents.</li> </ol>	If yes, enclose a detailed explanation.
15. Have you been the subject of any administrative penalties regarding your proformal reprimand, suspension, revocation, probation or voluntary license sur a detailed explanation and copies of all appropriate records.	
16. Are any unresolved complaints pending against you in any jurisdiction? Yes explanation and copies of all appropriate records.	No ☐ If yes, enclose a detailed
17. Do you have any impairment related to drugs or alcohol that would limit your Yes \sum No \subseteq If yes, enclose a detailed explanation and copies of all a	
If your application requires Board review, the Board office must receip PM ten full working days before the Board's next meeting date:  Completed, signed and notarized application form  Fee payment  All required supporting documentation.  Applications that are not complete within 12 months of filing may be complete your application is complete, please allow 4-8 weeks to receive your application.	onsidered abandoned and discarded.
AFFIDAVIT	
The undersigned, being sworn, deposes and says that he or she is applying for intern under the terms of Title 24 <i>Delaware Code</i> , Chapter 27; that he or she is t that all statements and answers herein are truthful; that he or she has not supprethis application; and that he or she has read and understands this affidavit and the are grounds for denial or subsequent revocation of a license.	he person who executed this application; essed any information that might affect
Signature of Applicant:	Date:
Printed Name:	
State of: County of:	
Sworn to before me and subscribed in my presence this	_ day of, 2
Signature of Notary:SEAL	

APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, INCOMPLETE OR NOT ACCOMPANIED BY THE REQUIRED FEE WILL BE REJECTED.

My Commission expires:



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# STATEMENT OF SUPERVISING LAND SURVEYOR - INTERNSHIP

Intern applicants must arrange for *each* actively practicing Land Surveyor who will supervise their internship to complete and mail this form *directly* to the Board of Professional Land Surveyors at the address above. You may copy this form. Additional forms are available at <a href="mailto:dpr.delaware.gov">dpr.delaware.gov</a> – click Land Surveyors, then Forms.

1.	Applicant Name:		NA: alalla
		First	Middle
2.	Supervising Land Surveyor:	First	Middle
3.	Do you hold a Delaware Land Surveyor license? If no, provide verification of licensure directly the Board office.		
4.	Business Name:		
5.	Business Address:		
	City	State	Zip
6.	Phone: Em-	ail:	
7.	Does the business named have a valid Delaware Certificate Number: <b>\$8 -</b>		If yes, enter DE
8.	Are you actively practicing land surveying? Yes	] No 🗌	
9.	Do you agree to provide total, direct supervision o projects as required by 24 Del. C. §2708 (a)(1) b.s		
10.	Do you agree to notify the Board of Professional Lapplicant ends? Yes \( \square\) No \( \square\)	and Surveyors within 30 days if your super	vision of the Intern
11.	Do you agree to complete and submit a <i>Verification</i> Board of Professional Land Surveyors at the address of the internship period, whichever is earlier? Yes	ess above at the end of your supervision of	
		AFFIDAVIT	
	e undersigned, being sworn, deposes and says that tements and answers are truthful; that he or she ha		
Sig	nature of Supervising Land Surveyor:		Date:
	State of: C	county of:	
	Sworn to before me and subscribed in my pre	sence this day of	, 2
<b>0</b> -			
SE	AL My Commission expir	res:	



Applicant Name: \_\_\_\_\_

Business Name:

Supervising Land Surveyor: \_\_\_\_\_

# STATE OF DELAWARE

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Middle

Middle

First

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## **VERIFICATION OF LAND SURVEYING EXPERIENCE**

Applicants for registration as a Surveyor Intern or Professional Land Surveyor licensure to practice land surveying in Delaware must submit proof that they have acquired required pre-internship or internship experience under the total direct supervision of a licensed, actively practicing professional land surveyor. This form is not required if applying on the basis of reciprocity. Each supervising land surveyor completes signs and submits this form *directly* to the Delaware Board office at the address above.

Last

4. Business Address:							
	C	City			State		Zip
5.	Phone:			Email:			
6.	Enter the follow	ving information	n about <b>each</b> pe	eriod during which th	ne applicant worked	under your direct	supervision.
	JURISDICTION DATES SUPERVIS		JPERVISED	YOUR TITLE			DATE
	SUPERVISED WORK TOOK PLACE	Start (month/year)	End (month/year)	DURING THIS PERIOD	YOUR LICENSE NUMBER	TYPE OF LICENSE	LICENSE ISSUED

	TYPE OF EXPERIENCE		FIELD (IN MONTHS)	OFFICE (IN MONTHS)
No	<u>ot</u> in responsible charge			
In	responsible charge of boundary and retracement surv	veys		
In	responsible charge of all surveys excluding boundary	and retracement surveys		
	TOTAL MC	ONTHS OF EXPERIENCE		
	e total months of field and office experience must equered in Question 6.	qual the total months in t	ne supervisory p	eriods you
	mplete this table to show whether or not the applican arge, under your direct supervision, of each area.	t has demonstrated satisf	actory experience	e in responsible
	AREA OF EXPERIENCE	DEMONSTRATED EXPERIENCE IN	APPLICANT D SATISFACTOR I RESPONSIBLE THIS AREA?	
	FIELD EXPERIENCE			
	Horizontal and Vertical Control Surveys	Yes [	] No 🗌	
	Boundary and Retracement Surveys	Yes [	] No 🗌	
	Geodetic Work	Yes [	] No 🗌	
	Topographic Surveys	Yes [	] No 🗌	
	Highway Construction Surveys	Yes [	] No 🗌	
	Subdivision Construction Layout	Yes [	] No 🗌	
	OFFICE EXPERIENCE			
	Record Research	Yes [	] No 🗌	
	Note Reduction	Yes [	] No 🗌	
	Subdivision Design	Yes [	] No 🗌	
	Plotting and Drafting	Yes [	] No 🗌	
	Property Descriptions	Yes [	] No 🗌	
	Stormwater Design	Yes [	] No 🗌	
	Boundary and Retracement Computations	Yes [	] No 🗌	
I certify	that the information I have provided is accurate and con	mplete to the best of my kr	nowledge and beli	ef.
Sianat	ture:	Date:		

**SEAL** 

#### LOG OF INTERN EXPERIENCE

The Log of Intern Experience is provided to help you keep accurate records of your intern hours. You will be asked to provide this information later on when you apply for licensure.

Combined office and field experience is defined as multi-faceted experience in responsible charge of land surveying projects, performed under the direct supervision of a professional land surveyor in the active practice of land surveying. The office aspect of this experience must include the technology relevant to civil drafting, mathematical calculations necessary for subdivision, boundary and right-of-way determinations, road, stormwater, sediment and erosion control, and sewer design as well as the interpolation of field-run topographical data and the like. Office experience should also include applied familiarity with land development submittal and approval processes.

Field experience must include time spent on site in responsible charge of inspection, evaluation, and gathering of relevant survey information. On-site supervision of and responsibility for field crew personnel while in communication and coordination with a professional land surveyor and office staff shall qualify as field experience.

#### **APPRENTICESHIP LOG**

Use this log to record apprenticeship hours completed. You may record the hours on a daily, weekly or monthly basis.

FROM THIS DATE (month/day/year)	TO THIS DATE (month/day/year)	TOTAL HOURS WORKED	Supervisor Signature	Apprentice Signature

FROM THIS DATE (month/day/year)	TO THIS DATE (month/day/year)	TOTAL HOURS WORKED	Supervisor Signature	Apprentice Signature

Copy additional sheets as needed.